	Application or Docket Number													
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003														
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALI TYPE	LEI	YTITY	OR		THAN ENTITY	
TOTAL CLAIMS			42					RAT	E	FEE	7	RATE	FEE ·	1
FOR			NUMBER	FILED	NUMBER EXTRA			BASIC	FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			47_minus 20=		· 27			XS 9)=		OR	XS18=	4860	
INDEPENDENT CLAIMS			8-1	inus 3 =	. 5			X43	3		OR	X86=	430	(A)
MI	JLTIPLE DEPE	NDENT CLAIM P	RESENT					+145	-		OR	+290=	750	
* If the difference in column 1 is less than zero, enter						column 2		TOTA	·		OR	TOTAL	1686	9
V/13/0:CLAIMS AS AMENDED - PART II										L.,.		OTHER		
(Column 1)			,	(Colun		(Column 3)	SMA	SMAI	L	LENTITY	OR	SMALL		
AMENDMENT A	·	REMAINING AFTER AMENDMENT		PREVIO	BER	PRESENT EXTRA		RATE	/	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	·
	Total	.47	Minus	47		4		X5 9	-		OR	X\$ 8=		
	Independent	.8	Minus	8		ŧ		X43=		(OF	X86=		
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							145	1			+290=		
								+145:			OR	+29U=		
								ADDIT. FI			JOR	ADDIT. FEE		
AMENDMENT B	1900	(Column 1) CLAMS		(Colum	ST	(Column 3)	ſ	-	-1	ADDI-	1		ADDI-	
	419	REMAINING AFTER AMENDMENT		NUMS PREVIO PAID F	USLY	PRESENT EXTRA		RATE		TIONAL FEE		RATE	TIONAL	
	Total ·.	. 45	Minus	-4	7	-		XS-9=	+		OR	X\$18=		
	Incependent	NTATION OF ME	Minus	****	<u>8</u>			X43=	1		OR	X86=		
	PIHOT PRESE	NIATION OF MC	LIPLE DEP	ENDENI	CLAIM	لــــلطـــــــ	19	+145=	7		OR	+290=		
							L	TOT/		•	OR ,	TOTAL		
		ĺ				•	OUII. I CLE							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE		ADDI- NONAL FEE		RATE	ADDI- TIONAL FEE	•
Ş	Total	•	Minus	••	•	•	Γ	X\$ 9=	T		OR	X\$18=		
ME	Independent		Minus	160		8	t	X43=	†			X86=		
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM		F		+		OR			
• 11	the entry in color	nn 1 is less than the	B entry in cohe	nn 2 withe "	O' in cot	uma 3 .	L	+145=	Ţ		OR	+290=		
* If the entry in column 1 is less than the entry in column 2, write "O" in column 3. **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											OR A	DDIT. FEE		
		ber Previously Paid					four	id in the e	ippr	opriate box	in colu	mn 1.		